

Form 990

## Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

2001

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning 1/1/2001, and ending 12/31/2001

B Check if applicable:  
☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return  
☐ Amended return  
☐ Application pending

C Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

G Web site www.associatedrecreation.org

J Organization type (check only one) ☒ 501(c)(3) (insert no) ☐ 4947(a)(1) or ☐ 527

K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail it should file a return without financial data. Some states require a complete return.

L Gross receipts. Add lines 6b, 8b, 9b, and 10b to line 12

D Employer identification number 911161701

E Telephone number 206233-7005

F Accounting method: ☐ Cash ☒ Accrual  
☐ Other (specify) \_\_\_\_\_

H and I are not applicable to section 527 organizations.  
H(a) Is this a group return for affiliates? ☒ Yes ☐ No  
H(b) If "Yes," enter number of affiliates 37  
H(c) Are all affiliates included? ☒ Yes ☐ No  
(If "No," attach a list. See instructions.)  
H(d) Is this a separate return filed by an organization covered by a group ruling? ☒ Yes ☐ No  
I Enter 4-digit GEN 2757

M Check ☒ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

## Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

1	Contributions, gifts, grants, and similar amounts received	1a	372,448	1d	855,802
a	Direct public support	1b		2	6296,245
b	Indirect public support	1c	483,354	3	
c	Government contributions (grants)			4	
d	Total (add lines 1a through 1c) (cash \$ <u>855,802</u> noncash \$ <u>6296,245</u> )			5	108,238
2	Program service revenue including government fees and contracts (attach schedule VII, line 93)			6a	
3	Membership dues and assessments			6b	
4	Interest on savings and temporary cash investments			6c	
5	Dividends and interest from securities			7	
6a	Gross rental income				
b	Less: rental expenses				
c	Net rental income or (loss) (subtract line 6b from line 6a)				
7	Other (describe: <u>OGDEN, UT</u> )				
8a	Gross amount from sales of assets other than inventory	(A) Securities		(B) Other	
b	Less: cost or other basis and sales expenses	8a			
c	Gain or (loss) (attach schedule)	8b			
d	Net gain or (loss) (combine lines 8a, 8b, and 8c)	8c			
9	Special events and activities (attach schedule)			8d	
a	Gross revenue (not including \$ <u>155,508</u> of contributions reported on line 1a)	9a	155,508		
b	Less: direct expenses other than fundraising expenses	9b			
c	Net income or (loss) from special events (subtract line 9b from line 9a)	9c	155,508		
10a	Gross sales of inventory, less returns and allowances	10a	309,003		
b	Less: cost of goods sold	10b	296,640		
c	Gross profit or (loss) from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	12,363		
11	Other revenue (from Part VII, line 103)	11			
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	7,428,156		
13	Program services (from line 44, column (B))	13	6,790,318		
14	Management and general (from line 44, column (C))	14	262,851		
15	Fundraising (from line 44, column (D))	15	0		
16	Payments to affiliates (attach schedule)	16	0		
17	Total expenses (add lines 16 and 44, column (A))	17	7,053,169		
18	Excess or (deficit) for the year (subtract line 17 from line 12)	18	374,987		
19	Net assets or fund balances at beginning of year (from line 73, column (A))	19	1,971,387		
20	Other changes in net assets or fund balances (attach explanation)	20			
21	Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	2,346,374		

For Paperwork Reduction Act Notice, see the separate instructions

Cat No 11282Y

Form 990 (2001)

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**Part II** Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	16,482	16,482	
26	Other salaries and wages	26	3,862,197	3,862,197	
27	Pension plan contributions	27			
28	Other employee benefits	28	60,543	60,543	
29	Payroll taxes	29	542,416	542,416	
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	436,192	436,192	
34	Telephone	34	6,982	6,982	
35	Postage and shipping	35	13,211	13,211	
36	Occupancy	36			
37	Equipment rental and maintenance	37			
38	Printing and publications	38			
39	Travel	39	11,465	11,465	
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42			
43	Other expenses not covered above (itemize): a	43a			
b		43b			
c		43c			
d		43d			
e	See Statement 14	43e	2103,681	1,840,830	262,851
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15.	44	7,053,169	6,790,318	262,851

Joint Costs Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ \_\_\_\_\_, (ii) the amount allocated to Program services \$ \_\_\_\_\_, (iii) the amount allocated to Management and general \$ \_\_\_\_\_, and (iv) the amount allocated to Fundraising \$ \_\_\_\_\_.

**Part III** Statement of Program Service Accomplishments (See Specific Instructions on page 24.)What is the organization's primary exempt purpose? **PROVIDE RECREATION/EDUCATION ACTIVITIES**  
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

	Program Service Expenses (Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others.)
a <i>Seattle Dept. of Parks &amp; Recreation Council</i> <i>Program Costs for Recreation Activities</i> <i>Held at Community Centers</i>	6,790,318
(Grants and allocations \$ _____)	
b	
(Grants and allocations \$ _____)	
c	
(Grants and allocations \$ _____)	
d	
(Grants and allocations \$ _____)	
e Other program services (attach schedule)	(Grants and allocations \$ _____)
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	6,790,318

**Part IV** Balance Sheets (See Specific Instructions on page 24)

Note		(A) Beginning of year		(B) End of year
45	Cash—non-interest-bearing	460,353	45	628,799
46	Savings and temporary cash investments	1,840,000	46	2,148,706
47a	Accounts receivable			
b	Less allowance for doubtful accounts		47c	5194
48a	Pledges receivable			
b	Less allowance for doubtful accounts		48c	
49	Grants receivable		49	42,391
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less allowance for doubtful accounts		51c	
52	Inventories for sale or use		52	
53	Prepaid expenses and deferred charges	9790	53	14,987
54	Investments—securities (attach schedule) <input type="checkbox"/> Cost <input type="checkbox"/> FMV		54	
55a	Investments—land, buildings, and equipment basis			
b	Less accumulated depreciation (attach schedule)		55c	
56	Investments—other (attach schedule)	109,725	56	0
57a	Land, buildings, and equipment basis			
b	Less accumulated depreciation (attach schedule)		57c	
58	Other assets (describe <input type="checkbox"/> )		58	
59	<b>Total assets</b> (add lines 45 through 58) (must equal line 74)	2,419,868	59	2,840,077
60	Accounts payable and accrued expenses	77,087	60	119,883
61	Grants payable		61	
62	Deferred revenue	130,551	62	99,101
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe <input type="checkbox"/> See Statement 5 )	240,843	65	274,719
66	<b>Total liabilities</b> (add lines 60 through 65)	448,481	66	493,703
67	Organizations that follow SFAS 117, check here <input type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74			
68	Unrestricted	1,963,387	67	2,338,374
69	Temporarily restricted	8000	68	8000
70	Permanently restricted		69	
71	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74			
72	Capital stock, trust principal, or current funds		70	
73	Paid-in or capital surplus, or land, building, and equipment fund		71	
74	Retained earnings, endowment, accumulated income, or other funds		72	
75	<b>Total net assets or fund balances</b> (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21)	1,971,387	73	2,346,374
76	<b>Total liabilities and net assets / fund balances</b> (add lines 66 and 73)	2,419,868	74	2,840,077

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

**Part IV-A**      Reconciliation of Revenue per Audited  
Financial Statements with Revenue per  
Return (See Specific Instructions, page 26)

#### Part IV-B Reconciliation of Expenses per Audited Financial Statements with Expenses per Return

**a** Total revenue, gains, and other support per audited financial statements **▶**

**b** Amounts included on line a but not on line 12, Form 990

(1) Net unrealized gains on investments \$ \_\_\_\_\_

(2) Donated services and use of facilities \$ \_\_\_\_\_

(3) Recoveries of prior year grants \$ \_\_\_\_\_

(4) Other (specify) \_\_\_\_\_

Statement 6 ... \$296,640  
Add amounts on lines (1) through (4) ►

c Line a minus line b

d Amounts included on line 12,  
Form 990 but not on line a

(1) Investment expenses  
not included on line  
8b, Form 990 \$ \_\_\_\_\_

(2) Other (specify)  
\$ \_\_\_\_\_

Add amounts on lines (1) and (2) ►

**e** Total revenue per line 12, Form 990  
(line c plus line d) **▶**

a Total expenses and losses per audited financial statements ▶

b Amounts included on line a but not on line 17, Form 990

(1) Donated services and use of facilities \$ \_\_\_\_\_

(2) Prior year adjustments reported on line 20, Form 990 \$ \_\_\_\_\_

(3) Losses reported on line 20, Form 990 \$ \_\_\_\_\_

(4) Other (specify) \_\_\_\_\_

Statement 7: \$296,646  
Add amounts on lines (1) through (4) ▶

**d** Amounts included on line 17, Form 990 but not on line a

**(1)** Investment expenses not included on line 6b, Form 990 \$ \_\_\_\_\_

**(2)** Other (specify) \_\_\_\_\_

Statement 8 \$262.85  
Add amounts on lines (1) and (2) ▶

**e** Total expenses per line 17, Form 990  
(line c plus line d) 

**Part V** List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No  
If "Yes," attach schedule—see Specific Instructions on page 27

**Part VI Other Information** (See Specific Instructions on page 27)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes		X
78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		X
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement		X
80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?		X
b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81a Enter direct or indirect political expenditures. See line 81 instructions. (81a)		
b Did the organization file Form 1120-POL for this year?		X
82a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?		X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) (82b)		
83a Did the organization comply with the public inspection requirements for returns and exemption applications?	X	
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	X	
84a Did the organization solicit any contributions or gifts that were not tax deductible?		X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?		
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c Dues, assessments, and similar amounts from members	N/A	
d Section 162(e) lobbying and political expenditures	N/A	
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	N/A	
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	N/A	
g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?		
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	N/A	
b Gross receipts included on line 12, for public use of club facilities	N/A	
87 501(c)(12) orgs Enter a Gross income from members or shareholders	N/A	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	N/A	
88 At any time during the year did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX		X
89a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 _____, section 4912 _____, section 4955 _____		
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction		X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		
d Enter Amount of tax on line 89c, above, reimbursed by the organization		
90a List the states with which a copy of this return is filed _____		
b Number of employees employed in the pay period that includes March 12, 2001 (See instructions.) (90b)	657	
91 The books are in care of _____ Telephone no _____ Located at _____ ZIP + 4 _____		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year (92)	N/A	

**Part VII Analysis of Income-Producing Activities** (See Specific Instructions on page 32)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512 513 or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a <i>See Statement 9</i>					6296,245
b					
c					
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments					
96 Dividends and interest from securities			14	108,238	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					155,508
102 Gross profit or (loss) from sales of inventory			3	1,854	10,506
103 Other revenue a					
b					
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				110,092	646,259
105 Total (add line 104, columns (B), (D), and (E))					6,572,351

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

**Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes** (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
1	<i>See Statement 10</i>
2	
3	
4	
5	

**Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities** (See Specific Instructions on page 33)

(A) Name, address, and EIN of corporation, partnership or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

**Part X Information Regarding Transfers Associated with Personal Benefit Contracts** (See Specific Instructions on page 33)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Date

May 10, 2002

R, DIRECTOR

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Organization Exempt Under Section 501(c)(3)**

(Except Private Foundation) and Section 501(e), 501(f), 501(k),  
501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0047

**2001**

Department of the Treasury  
Internal Revenue Service

**Supplementary Information—(See separate instructions )**

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

*ASSOCIATED RECREATION COUNCIL*

Employer identification number

*91 1161701*

**Part I**

**Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**

(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
<i>None</i>				
Total number of other employees paid over \$50,000 ▶	<i>0</i>			

**Part II**

**Compensation of the Five Highest Paid Independent Contractors for Professional Services**

(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
<i>None</i>		
Total number of others receiving over \$50,000 for professional services ▶	<i>0</i>	

**Part III** Statements About Activities (See page 2 of the instructions)

91-1161701

Yes No

- 1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ▶ \$ \_\_\_\_\_ (Must equal amounts on line 38, Part VI-A, or line 1 of Part VI-B)

Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities

- 2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)

- a Sale, exchange, or leasing of property?
- b Lending of money or other extension of credit?
- c Furnishing of goods, services, or facilities?
- d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
- e Transfer of any part of its income or assets?

1			X
2a			X
2b			X
2c			X
2d	X		
2e			X
3			X
4			X

Note Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments

**Part IV** Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is (Please check only **ONE** applicable box.)

- 5 ☐ A church, convention of churches, or association of churches Section 170(b)(1)(A)(i)
- 6 ☐ A school Section 170(b)(1)(A)(ii) (Also complete Part V)
- 7 ☐ A hospital or a cooperative hospital service organization Section 170(b)(1)(A)(iii)
- 8 ☐ A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)
- 9 ☐ A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hospital's name, city, and state ▶
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b)(1)(A)(iv) (Also complete the Support Schedule in Part IV-A)
- 11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 11b ☐ A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)
- 12 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2) (Also complete the Support Schedule in Part IV-A)
- 13 ☒ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2) (See section 509(a)(3))

Provide the following information about the supported organizations (See page 5 of the instructions)

(a) Name(s) of supported organization(s)	(b) Line number from above
SEE ATTACHED SCHEDULE	

- 14 ☐ An organization organized and operated to test for public safety Section 509(a)(4) (See page 6 of the instructions)



**Part IV-A Support Schedule** (Complete only if you checked a box on line 10, 11, or 12) Use cash method of accounting

Note You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)					
16 Membership fees received					
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19 Net income from unrelated business activities not included in line 18					
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	0	0	0	0	0
24 Line 23 minus line 17					
25 Enter 1% of line 23					
26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24				
					26a N/A
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.					26b N/A
c Total support for section 509(a)(1) test. Enter line 24, column (e).					26c N/A
d Add: Amounts from column (e) for lines 18 _____ 19 _____ 22 _____ 26b _____					26d N/A
e Public support (line 26c minus line 26d total)					26e N/A
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))					26f N/A %
27 Organizations described on line 12:	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.				
(2000) . . . . . (1999) . . . . . (1998) . . . . . (1997) . . . . .					
b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000 (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.					
(2000) . . . . . (1999) . . . . . (1998) . . . . . (1997) . . . . .					
c Add: Amounts from column (e) for lines 15 _____ 16 _____ 17 _____ 20 _____ 21 _____					27c N/A
d Add: Line 27a total _____ and line 27b total _____					27d N/A
e Public support (line 27c total minus line 27d total)					27e N/A
f Total support for section 509(a)(2) test. Enter amount from line 23, column (e).					27f N/A
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))					27g N/A %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))					27h N/A %
28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.					

**Part V****Private School Questionnaire** (See page 7 of the instructions)(To be completed **ONLY** by schools that checked the box on line 6 in Part IV) **N/A**

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?		
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?		
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement )		
32 Does the organization maintain the following		
a Records indicating the racial composition of the student body, faculty, and administrative staff?		
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?		
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?		
d Copies of all material used by the organization or on its behalf to solicit contributions?		
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement )		
33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?		
b Admissions policies?		
c Employment of faculty or administrative staff?		
d Scholarships or other financial assistance?		
e Educational policies?		
f Use of facilities?		
g Athletic programs?		
h Other extracurricular activities?		
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement.)		
34a Does the organization receive any financial aid or assistance from a governmental agency?		
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement.		
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev Proc 75-50 1975-2 C B 587, covering racial nondiscrimination? If "No," attach an explanation		

**Part VI-A** Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)  
(To be completed ONLY by an eligible organization that filed Form 5768)Check ☒ a ☐ if the organization belongs to an affiliated group Check ☐ b ☐ if you checked "a" and "limited control" provisions apply**Limits on Lobbying Expenditures**

(The term "expenditures" means amounts paid or incurred)

		(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36	Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	N/A
37	Total lobbying expenditures to influence a legislative body (direct lobbying)	37	
38	Total lobbying expenditures (add lines 36 and 37)	38	
39	Other exempt purpose expenditures	39	
40	Total exempt purpose expenditures (add lines 38 and 39)	40	
41	Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000	41	
42	Grassroots nontaxable amount (enter 25% of line 41)	42	
43	Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36	43	
44	Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38	44	

Caution. If there is an amount on either line 43 or line 44, you must file Form 4720

**4-Year Averaging Period Under Section 501(h)**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below  
See the instructions for lines 45 through 50 on page 11 of the instructions)

Calendar year (or fiscal year beginning in) ▶	Lobbying Expenditures During 4-Year Averaging Period				
	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45	Lobbying nontaxable amount				0
46	Lobbying ceiling amount (150% of line 45(e))				0
47	Total lobbying expenditures				0
48	Grassroots nontaxable amount				0
49	Grassroots ceiling amount (150% of line 48(e))				0
50	Grassroots lobbying expenditures				0

**Part VI-B** Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions) N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a Volunteers
- b Paid staff or management (Include compensation in expenses reported on lines c through h.)
- c Media advertisements
- d Mailings to members, legislators, or the public
- e Publications, or published or broadcast statements
- f Grants to other organizations for lobbying purposes
- g Direct contact with legislators, their staffs, government officials, or a legislative body
- h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i Total lobbying expenditures (Add lines c through h)

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Yes	No	Amount



ASSOCIATED RECREATION COUNCIL GROUP RETURN    91-1161701

FORM 990                      SPECIAL EVENTS AND ACTIVITIES                      STATEMENT 1

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME
BAKE SALES AND OTHER SPECIAL EVENTS	155,508		155,508		155,508
TO FM 990, PART I, LINE 9	155,508		155,508		155,508

ASSOCIATED RECREATION COUNCIL GROUP RETURN91-1161701FORM 990 INCOME AND COST OF GOODS SOLD  
INCLUDED ON PART I, LINE 10

STATEMENT 2

## INCOME

1	GROSS RECEIPTS	309,003	
2	RETURNS & ALLOWANCES		
3	LINE 1 LESS LINE 2		<u>309,003</u>
4	COST OF GOODS SOLD (LINE 13)	296,640	
5	GROSS PROFIT (LINE 3 LESS LINE 4)		<u><u>12,363</u></u>

## COST OF GOODS SOLD

6	INVENTORY AT BEGINNING OF YEAR		
7	MERCHANDISE PURCHASED		
8	COST OF LABOR		
9	MATERIALS AND SUPPLIES		
10	OTHER COSTS	296,640	
11	ADD LINE 6 THROUGH 10		<u>296,640</u>
12	INVENTORY AT END OF YEAR	0	
13	COST OF GOODS SOLD (LINE 11 LESS LINE 12)		<u><u>296,640</u></u>

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## ASSOCIATED RECREATION COUNCIL GROUP RETURN

91-1161701

FORM 990

COST OF GOODS SOLD - OTHER COSTS

STATEMENT 3

## DESCRIPTION

COST OF GOODS SOLD

AMOUNT

296,640

TO FM 990, PART I, LINE 10B

296,640

FORM 990

OTHER EXPENSES

STATEMENT 4

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
PROGRAM LITERATURE	101,897	101,897		
BANK FEES	29,008	29,008		
OFFSITE PROGRAMS	7,256	7,256		
DUES & SUBSCRIPTIONS	9,034	9,034		
REGISTRATION FEES	51,907	51,907		
RECREATION SUPPLIES	184,574	184,574		
SPORTS OFFICIALS	94,662	94,662		
PARTICIPANT FIELD TRIP	178,740	178,740		
RENTALS	90,942	90,942		
CASUAL LABOR	59,335	59,335		
UNIFORMS	153,089	153,089		
AWARDS & TROPHIES	48,039	48,039		
LICENSES & TAXES	98,312	98,312		
REPAIR & MAINTENANCE	41,422	41,422		
INSURANCE	24,256	24,256		
OUTSIDE SERVICES	374,370	374,370		
MISCELLANEOUS	104,965	104,965		
ARC SERVICE FEES	262,851		262,851	
CITY OF SEATTLE FACILITY PARTICIPATION FEES	189,022	189,022		
	2,103,681	1,840,830	262,851	0

TOTAL TO FM 990, LN 43

ASSOCIATED RECREATION COUNCIL GROUP RETURN    91-1161701

FORM 990                      OTHER LIABILITIES                      STATEMENT 5

<u>DESCRIPTION</u>	<u>AMOUNT</u>
ACCRUED PAYROLL AND RELATED TAXES	201,945
SALES AND EXCISE TAX PAYABLES	<u>72,774</u>
990, PART IV, LINE 65, COLUMN B	<u>274,719</u>

FORM 990                      OTHER REVENUE NOT INCLUDED ON FORM 990                      STATEMENT 6

<u>DESCRIPTION</u>	<u>AMOUNT</u>
COST OF GOODS SOLD	<u>296,640</u>
TOTAL TO FORM 990, PART IV-A	<u>296,640</u>

FORM 990                      OTHER EXPENSES NOT INCLUDED ON FORM 990                      STATEMENT 7

<u>DESCRIPTION</u>	<u>AMOUNT</u>
COST OF GOODS SOLD	<u>296,640</u>
TOTAL TO FORM 990, PART IV-B	<u>296,640</u>



ASSOCIATED RECREATION COUNCIL GROUP RETURN

91-1161701

FORM 990

OTHER EXPENSES INCLUDED ON FORM 990

STATEMENT 8

DESCRIPTION

DESCRIPTION	AMOUNT
ARC SERVICE FEES	262,851
TO FM 990, PART IV-B	262,851

FORM 990

PROGRAM REVENUE

STATEMENT 9

DESCRIPTION	BUS CODE	UNRELATED BUSINESS INC	EXCL CODE	EXCLUDED AMOUNT	RELATED OR EXEMPT FUNC- TION INCOME
CLASS FEES					4,802,355
SPORTS FEES					726,883
FACILITY RENTAL STAFF					209,457
DUES & INSURANCE					11,078
FUNDRAISING					153,620
SPECIAL SVC CONTRACTS					189,439
FIELD TRIPS					203,413
TO FORM 990, PART VII, LINE 93					6,296,245

FORM 990

PART VIII - RELATIONSHIP OF ACTIVITIES TO  
ACCOMPLISHMENT OF EXEMPT PURPOSES

STATEMENT 10

LINE	EXPLANATION OF RELATIONSHIP OF ACTIVITIES
93A	COLLECTION OF FEES TO CONDUCT ACTIVITIES WHICH ENABLE EACH ADVISORY COUNCIL TO FURTHER THEIR GOAL OF PROVIDING THE COMMUNITY WITH ACCESS TO RECREATION AND EDUCATION PROGRAMS
102	MINIMAL FEES CHARGED TO PARTICIPANTS TO DEFRAY COSTS OF OPERATING PROGRAMS
101	VARIETY OF FUND RAISING EVENTS THAT ENABLE EACH ADVISORY COUNCIL TO FURTHER THEIR GOAL OF PROVIDING THE COMMUNITY WITH ACCESS TO RECREATION AND EDUCATION PROGRAMS

## ATTACHMENT 1

Associated Recreation Council  
Group Return  
100 Dexter Avenue North  
Seattle, Wa 98109

List of Officers, Directors, Trustees Federal ID No 91-1161701  
and Key Employees

Group Return 2757

(A) Name and Address	(B) Title and Average hours per week devoted to position	(C) Compensation	(D) Contributions to employee benefit plan & deferred compensation	(E) Expense Acct and other allowances
Jackie Ramels 5722 SW Admiral Way Seattle, WA 98116	President 3 hours	0	0	0
Tim Amen 20807 32nd Pl W Lynwood, Wa 98036	Vice President 1 hour	0	0	0
Anna Martin 5418 57th Ave S Seattle, Wa 98118	Secretary 1 hour	0	0	0
Larry Luke 15747 Greenwood Ave N Seattle, WA 98133	Director 1/2 hour	0	0	0
Tom Langley 10115 Greenwood Ave N #254 Seattle, WA 98133-9197	Director 1/2 hour	0	0	0
Kiki Hendren 2801 NW 60th Seattle, WA 98107	Director 1/2 hour	0	0	0
Cheryl L. Dyer 8808 28th Ave NW Seattle, WA 98117	Director 1/2 hour	0	0	0
Edward Hiroo 25913 141st Ave SE Kent, WA 98042	Director 1/2 hour	0	0	0
Fabiola Woods 3904 MLK Way S #20 Seattle, WA 98108	Director 1/2 hour	0	0	0

Cleo Perfer 4746 Delridge Way SW Seattle, WA 98106	Director 1/2 hour	0	0	0
Bruce Bentley 1613 SW Austin ST Seattle, WA 98106	Director 1/2 hour	0	0	0
Mele Feiloakitua 1624 14th Avenue Seattle, WA 98122-4026	Director 1/2 hour	0	0	0
P T Martin 10024 40th Ave NE Seattle, WA 98125	Director 1/2 hour	0	0	0
James Luster 9630 55th Ave S Seattle, WA 98118-5707	Director 1/2 hour	0	0	0
William Lowe 2107 Republican St Seattle, WA 98112	Director 1/2 hour	0	0	0
Bill Keller c/o Associated Recreation Council 100 Dexter Ave N Seattle, WA 98109	Executive Director 10 hours	16550	560	

ASSOCIATED RECREATION COUNCIL  
100 DEXTER AVE NO  
SEATTLE, WA 98109

12/31/2001

FED I.D 91-11617C

GROUP RETURN 2757

<u>TAX NUMBER</u>	<u>(A) NAME OF SUPPORTED ORGANIZATION</u>	<u>(B) BOX NO</u>
51-0209850	SPORTS ADVISORY COUNCIL	13
51-0208294	JEFFERSON ADVISORY COUNCIL	13
51-0208300	OUTDOOR RECREATION COUNCIL(CAMP LONG)	13
51-0208303	SOUTHWEST ADVISORY COUNCIL	13
51-0208304	LANGSTON HUGHES ADVISORY COUNCIL	13
51-0208305	MILLER ADVISORY COUNCIL	13
51-0208306	GARFIELD ADVISORY COUNCIL	13
91-2089008	GARFIELD TEEN LIFE CENTER ADVISORY COUNCIL	13
51-0208308	ALKI ADVISORY COUNCIL	13
91-0863529	SPECIAL PROGRAMS ADVISORY COUNCIL	13
51-0208310	RAINIER BEACH ADVISORY COUNCIL	13
51-0208365	RAINIER ADVISORY COUNCIL	13
51-0208311	BALLARD ADVISORY COUNCIL	13
51-0208316	LOYAL HEIGHTS ADVISORY COUNCIL	13
51-0208319	MAGNOLIA ADVISORY COUNCIL	13
51-0208322	QUEEN ANNE ADVISORY COUNCIL	13
51-0208328	HIAWATHA ADVISORY COUNCIL	13
51-0208332	SENIOR ADULTS ADVISORY COUNCIL	13
51-0208336	MEADOWBROOK ADVISORY COUNCIL	13
51-0208342	VAN ASSELT ADVISORY COUNCIL	13
51-0208348	HIGH POINT ADVISORY COUNCIL	13
91-1186082	DISCOVERY PARK ADVISORY COUNCIL	13
51-0208352	DELRIDGE ADVISORY COUNCIL	13
94-3208854	CARKEEK PARK ADVISORY COUNCIL	13
51-1186088	LAURELHURST ADVISORY COUNCIL	13
51-0208357	SOUTH PARK ADVISORY COUNCIL	13
91-1177413	BITTER LAKE ADVISORY COUNCIL	13
91-1186085	GREEN LAKE ADVISORY COUNCIL	13
91-1351757	RAVENNA-ECKSTEIN ADVISORY COUNCIL	13
91-2085232	JAPANESE GARDENS ADVISORY COUNCIL	13
91-1186091	TENNIS ADVISORY COUNCIL	13
91-1209760	SEATTLE CANOE ADVISORY COUNCIL	13
91-1190194	SEATTLE ROWING ADVISORY COUNCIL	13
91-0987497	MONTLAKE ADVISORY COUNCIL	13
91-1558922	YESLER ADVISORY COUNCIL	13
91-1293949	MT BAKER BOATING ADVISORY COUNCIL	13
91-2152536	SAND POINT TRADITIONS ADVISORY COUNCIL	13